Published by Health Services Analysis Section Olympia, WA 98504-4322



PB 03-07

# THIS ISSUE

Implementation of the Prospective Drug Utilization Review Program

#### TO:

Pharmacies
Hospital Administrators
Please route to:
Pharmacies
Administration Office
Finance Office
Self Insurers

#### CONTACT:

**Provider Toll Free** 1-800-848-0811 902-6500 in Olympia

Jaymie Mai, Pharm.D Office of the Medical Director PO Box 44321 Olympia WA 98504-4321

360-902-6792 email: maij235@lni.wa.gov

Copyright Information: Many Provider Bulletins contain Physician's Current Procedural Terminology (CPT\*) codes. CPT\* is a registered trademark of the American Medical Association (AMA). CPT\* five-digit codes, descriptions, and other data only are copyright 2001 American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values or related listings are included in CPT\*. AMA does not directly or indirectly practice medicine or dispense medical services. AMA assumes no liability for data contained or not contained herein.

# Provider Bulletins/Updates are available on the Web at:

http://www.lni.wa.gov/hsa/ProvBulletins/hsa\_pbs.htm

#### **Purpose**

This bulletin announces the implementation of the prospective drug utilization review (PRO-DUR) to the Washington State Fund's pharmacy point-of-service (POS) system on **August 1, 2003**. It also describes which PRO-DUR codes the department will apply, concurrent screening with refill-too-soon, and the administrative requirements to override the reject codes.

The POS system uses the National Council for Prescription Drug Programs (NCPDP) version 3B format. Specific details on the format are described in Provider Bulletin 99-06.

## Prospective drug utilization codes

The department is using the clinical modules from First DataBank® to perform PRO-DUR screening for all pharmacy bills. Pharmacy bills will be denied (reject code 88) when potential high dose, therapeutic duplication, or drug-drug interaction level 1 conditions exist. All bills will be processed and edited through the POS system regardless of how they are submitted.

# Overriding a PRO-DUR denied bill

After pharmacists have conducted their professional review, the appropriate NCPDP DUR conflict, intervention, and outcome codes can be used to override the denials. **Pharmacies must retain file documentation of the reasons for the override**.

When a denied PRO-DUR bill needs to be overridden, pharmacy providers should enter an appropriate DUR code from each category in the following order:

- 1. Two byte alpha DUR Conflict Code,
- 2. Two byte alphanumeric DUR Intervention Code, and
- 3. Two byte alphanumeric DUR Outcome Code.

In situations where pharmacists have identified a DUR condition prior to bill submission and an override is warranted, they may enter the appropriate DUR codes with initial billing without waiting for a PRO-DUR denial from the department. Additionally, when a bill is denied for multiple DUR conditions, pharmacists may override the denials using any one of the conditions DUR conflict codes.

Bill submitters using other formats may enter the DUR codes in the following fields:

**TAPE FORMAT**: DD Record Fields, 18 - 20.

**EMC FORMAT**: Remarks Field. **PAPER FORMAT**: DUR Codes Field.

An example of a valid override is **<u>DDM01G</u>** (Drug-drug interaction/MD interface/Filled after prescriber approval).

By overriding a PRO-DUR denial, the pharmacist is certifying that the indicated DUR code is true and documentation is on file.

## NCPDP DUR CODES

Data Element	Field #	<b>Required Status</b>	Description/Valid Values
DUR CONFLICT	439	Conditional	Enter when resubmitting a claim previously denied
CODE			for reject code 88 – DUR problem. Enter the
			appropriate DUR conflict code.
			Valid Conflict Codes:
			DD — Drug-drug interaction
			HD — High dose alert
			TD — Therapeutic duplication alert
DUR	440	Conditional	Enter when resubmitting a claim previously denied
INTERVENTION			for reject code 88 – DUR problem. Enter the
CODE			appropriate DUR intervention code.
			Valid Intervention Codes:
			M0 (M, Zero) – MD Interface
			P0 (P, Zero) – Patient Interaction
			R0 (R, Zero) – Pharmacist Reviewed
DUR OUTCOME	441	Conditional	Enter when resubmitting a claim previously denied
CODE			for reject code 88 – DUR problem. Enter the
			appropriate DUR outcome code.
			Tr Tr
			Valid Outcome Codes:
			1A — Filled, false positive
			1B — Filled as is
			1C — Filled with different dose
			1D — Filled with different directions
			1F — Filled with different quantity
			1G — Filled after prescriber approval obtained
			15 Timed after presented approval obtained

### Refill-too-soon edit

The department is also using refill-too-soon to concurrently screen all submitted pharmacy bills to deter over-utilization or excess of any particular drug. The POS system will deny (reject code 79) pharmacy bills that have <70% of days supply used at time of refill. However, pharmacists will have override capability.

# Overriding a refill-too-soon rejected bill

When overriding a refill-too-soon rejected bill, enter a valid value from the following table of the payor sheet:

Field #	<b>Required Status</b>	Description/Valid Values
420	Conditional	Enter when resubmitting a claim previously denied
		for reject code 79 – <b>refill too soon</b> . Enter the
		appropriate value for a refill-too-soon edit.
		Valid values:  03 (ZERO, 3) — Vacation supply  04 (ZERO, 4) — Lost prescription  05 (ZERO, 5) — Therapy change  06 (ZERO, 6) — Starter dose  07 (ZERO, 7) — Medically necessary
		- 1

Bill submitters using other formats may enter an appropriate valid value for reject code 79 in the following fields:

**TAPE FORMAT:** DD Record Field 21 (NEW).

**EMC FORMAT:** Remarks Field. **PAPER FORMAT:** Remarks Field.

# PRO-DUR codes or refill-too-soon edit questions

If you have questions regarding DUR codes or a refill-too-soon edit, please contact the Provider Hotline (PHL) at 1-800-848-0811.

If you have questions regarding Tape/EMC formats, please contact the Electronic Billing Unit at (360) 902-6511 or email <a href="mailto:ebulni@lni.wa.gov">ebulni@lni.wa.gov</a>. Tape/EMC billers will be receiving a separate letter outlining format changes.